



PTO/SB/10 (1-99)

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| (37 CFR 1.9(f) & 1.27(c))—SMALL BUSINESS CONCERN  | Docket Number (Optional)       |  |  |  |  |  |  |
|---|--------------------------------|--|--|--|--|--|--|
| Applicant, Patentee, or Identifier: HAIM 2VI MELMAN Application or Patent No.: Filed or Issued: Title: APPARATUS AND METHOD FOR SEARCH AND RETRIEVAL  | OF DOCUMENTS                   |  |  |  |  |  |  |
| I hereby state that I am the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern  |                                |  |  |  |  |  |  |
| NAME OF SMALL BUSINESS CONCERN_INFOBIT_LTD.   |                                |  |  |  |  |  |  |
| ADDRESS OF SMALL BUSINESS CONCERN_43 HA'AZMAUT STRO   | SET                            |  |  |  |  |  |  |
| I hereby state that the above identified small business concern qualifies as a small but 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Tradem to size standards for a small business concern may be directed to: Small Business Adminis 409 Third Street, SW, Washington, DC 20416.   | ark Office. Questions related  |  |  |  |  |  |  |
| I hereby state that rights under contract or law have been conveyed to and remain with identified above with regard to the invention described in:  | 1 the small business concern   |  |  |  |  |  |  |
| the specification filed herewith with title as listed above. the application identified above. the patent identified above.   |                                |  |  |  |  |  |  |
| If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e). |                                |  |  |  |  |  |  |
| Each person, concern, or organization having any rights in the invention is listed below no such person, concern, or organization exists.  — each such person, concern, or organization is listed below.  | ar.                            |  |  |  |  |  |  |
| Separate statements are required from each named person, concern or organization to stating their status as small entities. (37 CFR 1.27)   | naving rights to the invention |  |  |  |  |  |  |
| I acknowledge the duty to file, in this application or patent, notification of any change entitlement to small entity status prior to paying, or at the time of paying, the earliest of the is fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.  | ssue fee or any maintenance    |  |  |  |  |  |  |
|   |                                |  |  |  |  |  |  |
| NAME OF PERSON SIGNING HAIM ZVI MEL   |                                |  |  |  |  |  |  |
| TITLE OF PERSON IF OTHER THAN OWNER GENERAL MANAG   | <u>ER</u>                      |  |  |  |  |  |  |
| ADDRESS OF PERSON SIGNING 3 HAGAI STREET, KFAR-SA   | BA, ISRAEL 44335               |  |  |  |  |  |  |
| SIGNATURE DATE  | <u>3 SEP. 1999</u>             |  |  |  |  |  |  |

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☑ Declaration Submitted with Initial Filing

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|  |                                     |   | Attorney Docket Number | er |  |  |
|--|-------------------------------------|---|------------------------|----|--|--|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) |                                     | First Named Inventor                                | HAIM Z. MELMAN         |    |  |  |
|  |                                     | COMPLETE IF KNOWN                                   |                        |    |  |  |
|  |                                     | Application Number                                  | /                      |    |  |  |
| Declaration Submitted OR with Initial Filing                       |                                     |   | Filing Date            |    |  |  |
|  | Declaration Submitted after Initial | Group Art Unit                                      |                        |    |  |  |
|  |                                     | Filing (surcharge<br>(37 CFR 1.16 (e))<br>required) | Examiner Name          |    |  |  |

| As a below named inventor, I hereby declare that:   |  |                                     |                         |                     |                  |  |  |  |
|---|--|-------------------------------------|-------------------------|---------------------|------------------|--|--|--|
| My residence, post office   | My residence, post office address, and citizenship are as stated below next to my name.  |                                     |                         |                     |                  |  |  |  |
| I believe I am the original,<br>names are listed below) o   | I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |                                     |                         |                     |                  |  |  |  |
| ADDARATUS   | AND METHO  | DD FOR SE                           | ARCH A                  | 2NB                 | idilec.          |  |  |  |
| APPARATUS AND METHOD FOR SEARCH AND RETRIEVAL OF DOCUMENTS  |  |                                     |                         |                     |                  |  |  |  |
| the specification of which (Title of the Invention)   |  |                                     |                         |                     |                  |  |  |  |
| OR  |  | <del></del>                         |                         |                     |                  |  |  |  |
| was filed on (MM/DD/YYYY) as United States Application Number or PCT International  |  |                                     |                         |                     |                  |  |  |  |
| Application Number  | and w  | as amended on (MM/DD/               | mm                      |                     | (if applicable). |  |  |  |
| I hereby state that I have n<br>amended by any amendme  | eviewed and understand the<br>ent specifically referred to ab  | contents of the above idea          | ntified specification   | n, including the c  | daims, as        |  |  |  |
| I acknowledge the duty to   | disclose information which is  | material to patentability as        | defined in 37 CF        | R 1.56.             |                  |  |  |  |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. |  |                                     |                         |                     |                  |  |  |  |
| Prior Foreign Application<br>Number(s)  | Country  | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed | Certified Co<br>YES | py Attached?     |  |  |  |
|   |  | 00 (0                               | I Con Columnica         | 165                 | NO               |  |  |  |
| 126373  | ISRAEL   | 09/27/198                           |                         |                     | 図                |  |  |  |
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|   |  |                                     |                         |                     |                  |  |  |  |
| <del></del>   |  |                                     |                         | Ц                   |                  |  |  |  |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:   |  |                                     |                         |                     |                  |  |  |  |
|   | under 35 U.S.C. 119(e) of an   |                                     | l application(s) lis    | ted below.          |                  |  |  |  |
| Application Number  | (s) Filing Date  | (MM/DD/YYYY)                        |                         |                     |                  |  |  |  |
|   |  |                                     |                         | onal provisiona     |                  |  |  |  |
|   |  |                                     |                         | ers are listed or   | _                |  |  |  |
|   |  |                                     |                         | mental priority     |                  |  |  |  |
|   |  |                                     | F1U/S                   | B/02B attache       | o nereto.        |  |  |  |
|   |  | i                                   |                         |                     |                  |  |  |  |

[Page 1 of 2]
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Additional inventors are being named on the

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## **DECLARATION** — Utility or Design Patent Application

|   |  |   |                                    |  |                                      | =                   |                                      |                               |                        |                    | J G. G. G.                            |                   |  |
|---|--|---|------------------------------------|--|--------------------------------------|---------------------|--------------------------------------|-------------------------------|------------------------|--------------------|---------------------------------------|-------------------|--|
| United States of<br>information white   | r PCT Ir<br>ch is ma   | ca, iisted below i<br>itemational applicaterial to patental | and, in<br>cation is<br>bility as  | of any United Sta<br>sofar as the subj<br>in the manner pro<br>is defined in 37 C<br>of this application | ect matte<br>vided by t<br>FR 1.56 v | r or ea<br>he first | ach of t<br>toaraor                  | he claims of thanh of 35 U.S. | nis applica<br>C 112 L | ition is<br>acknow | s not disclosed                       | in the pric       |  |
| U.S. Parent Application or PCT Parent Number  |  |   | Parent Filing Date<br>(MM/DD/YYYY) |  |                                      |                     | Parent Patent Number (if applicable) |                               |                        |                    |                                       |                   |  |
|   |  |   |                                    |  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
|   |  |   |                                    | ation numbers are  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
| As a named inve<br>and Trademark  | entor, I h<br>Office co  | ereby appoint the connected therewise                       | e follow<br>th:                    | ving registered pro<br>Customer Numl<br>OR   |                                      | s) to p             | rosecut                              | e this application            | on and to              | transa             | ct all business Place Cust Number Bar | omer              |  |
|   |  |   |                                    | Registered prac  | titioner(s)                          | name                | /registra                            | ation number lis              | sted belov             | , L                | Label he                              |                   |  |
|   | Nam  | е   |                                    | Regist   |                                      |                     |                                      | Nam                           | ne                     |                    |                                       | stration<br>imber |  |
|   |  |   | _                                  |  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
| Additional re   | gistere  | d practitioner(s) r   | named (                            | on supplemental  | Registere                            | d Prac              | titioner                             | Information she               | et PTO/S               | SB/020             | C attached here                       | ∍to.              |  |
| Direct all corre  | Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☐ Correspondence address belo |   |                                    |  |                                      |                     | ress belov                           |                               |                        |                    |                                       |                   |  |
| Name  | Name HAIM ZVI MELMAN   |   |                                    |  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
| Address   | <u>3</u>   | HAGA  | 1                                  | STREE  | -                                    |                     |                                      |                               |                        |                    |                                       |                   |  |
| Address   |  |   |                                    |  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
| City  | KF   | AR-SABA   |                                    |  |                                      | State ZIP           |                                      |                               | ZIP                    | 44335              |                                       |                   |  |
| Country   | 151  | RAEL  |                                    | Telephon   | e +97'                               | 2-9-7651589         |                                      |                               | Fax                    |                    | 972-9-76787                           |                   |  |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. |  |   |                                    |  |                                      |                     |                                      |                               |                        |                    |                                       |                   |  |
| Name of So  | le or F  | irst Invento  | r:                                 |  | •                                    |                     | A petiti                             | on has been                   | filed for              | this u             | ınsigned inve                         | entor             |  |
| Giv   | en Nar   | ne (first and mi  | iddle [i                           | if any])   | 1                                    |                     |                                      | Family                        | v Name                 | or Su              | mame                                  |                   |  |
| HAI   | M  | ZVI   |                                    |  |                                      | MELMAN              |                                      |                               |                        |                    |                                       |                   |  |
| Inventor's<br>Signature   |  |   |                                    | $\wedge$   | (w)                                  | ررمر                | 10                                   |                               | -                      |                    | Date                                  | 3SEP9             |  |
| Residence: Ci   | ty   | KFAR-S  | SAB                                | A State  |                                      | T                   | cuntry                               | ISR                           | AEL                    |                    | Citizenship                           | ISRAEL            |  |
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supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto